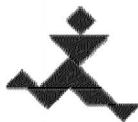


EXHIBIT C



Michelle Hulse
Stevens/US-Corp02/3M/US
08/02/2013 04:19 PM

To Jay Issa/US-Corp01/3M/US@3M-Corporate, Mark J. Scott/US-EdenPrairie/3M/US@3M-Corporate, Nancy M. Klinger/US-Corporate/3M/US@3M-Corporate, Inma Soria/US-Corporate/3M/US@3M-Corporate
cc Ann Peddle Meitz/US-Corporate/3M/US, Silvia M. Perez/US-Corp01/3M/US@3M-Corporate, Henry L. - Healthcare Chang/US-Corporate/3M/US@3M-Corporate, Gary Hansen/US-Corp03/3M/US@3M-Corporate, Maureen A. Harms/LA-Legal/3M/US@3M-Corporate, Joseph A. Gillis/US-Corporate/3M/US@3M-Corporate
bcc
Subject FAW aerobiology and the Orthopedic International Consensus Meeting on Prevention of Prosthetic Joint Infection

All,

I sat in on the group addressing the OR environment for this consensus document. There is amazing concern about any particulates in the air during joint replacement surgery and almost uniform comment that FAW increases particulates in the air. They are so sensitive to this issue that they discussed the contribution of talking to particulates, and to the difference in squames shedding between male and female OR staff. They equate particulates with bacteria in the air and cite studies (do not have the citations) that support this.

The draft document will be sent to us sometime in the next few weeks (Joe Gillis will get it) and the terminology in the consensus statement can be reviewed. Keep in mind a consensus document is not necessarily evidence based, it allows opinion to carry weight. I mention this now so that if an aerobiology study needs to be considered for 2014 to lay this concern to rest the budget and rationale can be included in the 2014 budgeting planning.

Also, do we have a copy of the ECRI review that can be sent to surgeons with concerns? I have one in particular in mind.

Michelle



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